

NOV 15 2005

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/650,679	
	Filing Date	Aug. 29, 2003	
	First Named Inventor	Rafael Rivera	
	Art Unit	3652	
	Examiner Name	Gregory W. Adams	
Total Number of Pages in This Submission	9	Attorney Docket Number	84,530

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): REQUEST FOR STATUTORY INVENTION REGISTRATION (SIR) PRELIMINARY AMENDMENT
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Office of Counsel, Code 004, NSWC Carderock Division		
Signature	<i>Jacob Shuster</i>		
Printed name	Jacob Shuster		
Date	11/15/05	Reg. No.	19,660

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature	<i>Dorothy J. Vranish</i>		
Typed or printed name	Dorothy J. Vranish	Date	11/15/05

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/94 (11-04)

Approved for use through 04/30/2006. OMB 0651-0036

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Request for Statutory Invention RegistrationApplication Number 10/650,679, or ☐ attached heretoFiled: Aug. 29, 2003Applicant(s): Rafael Rivera and Christopher ClemmerTitle: Container Conveyor Load TransferRECEIVED
CENTRAL FAX CENTER

NOV 15 2005

A. In the above identified patent application, I hereby:

1. Request and authorize the Director of the U.S. Patent and Trademark Office to publish the above identified regularly filed patent application as a Statutory Invention Registration. (35 U.S.C. 157)
2. Waive the right to receive a United States patent on the same invention claimed in the above identified patent application. These rights, which are waived, include those specified in 35 U.S.C. 183 and 271 through 289 as well as all attributes specified for patents in any other provisions of law other than title 35, United States Code. The waiver includes, but is not limited to, the remedies under 19 U.S.C. 1337, 22 U.S.C. 2356 and 28 U.S.C. 1498. (35 U.S.C. 157(c))
3. Understand that the above waiver will be effective pursuant to 37 CFR 1.293 upon publication of the Statutory Invention Registration to waive the inventor's right to receive a United States patent on the invention claimed in the Statutory Invention Registration. (37 CFR 1.293(b)(1))
4. State that, in my opinion, the disclosure and claims of the above identified patent application meet the requirements of 35 U.S.C. 112. (37 CFR 1.293(b)(3))
5. State that, in my opinion, the above identified patent application complies with the requirements for printing as set forth in the Rules of Practice for Patent Cases, 37 CFR Part 1. (37 CFR 1.293(b)(4))
6. Enclose the fee set forth in 37 CFR 1.17(n) or (o) for requesting publication of a Statutory Invention Registration:

☐ A first Office Action has not been mailed in the above application, 37 CFR 1.17(n) (fee code 1804) \$ _____☒ A first Office Action has been mailed in the above application, 37 CFR 1.17(o) (fee code 1805) \$1840.00

Request fee \$ _____

MINUS BASIC FILING FEE, IF PREVIOUSLY PAID☒ Basic filing fee for utility patent application set forth in 37 CFR 1.16(a); minus \$ -750.00☐ Basic filing fee for design patent application set forth in 37 CFR 1.16(f); or☐ Basic filing fee for plant patent application set forth in 37 CFR 1.16(g)

Minus basic filing fee \$ _____

Amount due \$ 1090.00

Payment charged to credit card _____ Form PTO-2038 is attached.

Amount enclosed by check or money order _____

Please charge Deposit Account No. 50-0958 the amount of \$1090.00. A duplicate copy of this form is attached.If payment of any additional fee is required for publication of the Statutory Invention Registration, charge such amount to Deposit Account No. 50-0958. A duplicate copy of this form is attached.

* Where this request is submitted at the time the application is filed, the filing fee is included in the fee.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 167. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 24 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2

10650679

500958

00000109

1090.00 DA

01 FC:1805

PTO/SB/84 (11-04)

Approved for use through 04/30/2008. OMB 0851-0038

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

- B. For printing of the Statutory Invention Registration front page, if desired, list below the name(s) of not more than 3 registered patent attorneys and agents OR alternatively, the name of a firm having as a member a registered patent attorney or agent. If no name is listed below, no name will be printed on the Statutory Invention Registration.

Jacob Shuster, Reg. No. 19,660

- C. Name of assignee, if any, for printing on the Statutory Invention Registration the United States of America
as represented by the Secretary of the Navy

Address (City and State or Country) Washington, D.C.

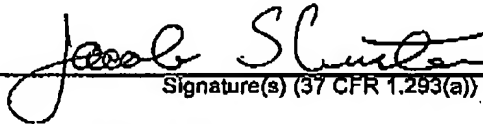
State of incorporation, if assignee is a corporation _____

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

The party or parties signing this form are:

☒ attorney or agent of record. Registration Number 19,660

☐ applicant(s) and any assignee


Signature(s) (37 CFR 1.293(a))

Jacob Shuster

Typed or Printed Name(s)

19,660

Registration Number, if applicable

301 227-1835

Telephone Number

PTO/SB/94 (11-04)

Approved for use through 04/30/2008. OMB 0851-0036

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Request for Statutory Invention RegistrationApplication Number 10/650,679, or ☐ attached heretoFiled: Aug. 29, 2003Applicant(s): Rafael Rivera and Christopher ClemmerTitle: Container Conveyor Load Transfer**RECEIVED**
CENTRAL FAX CENTER**NOV 15 2005**

A. In the above identified patent application, I hereby:

1. Request and authorize the Director of the U.S. Patent and Trademark Office to publish the above identified regularly filed patent application as a Statutory Invention Registration. (35 U.S.C. 157)

2. Waive the right to receive a United States patent on the same invention claimed in the above identified patent application. These rights, which are waived, include those specified in 35 U.S.C. 183 and 271 through 289 as well as all attributes specified for patents in any other provisions of law other than title 35, United States Code. The waiver includes, but is not limited to, the remedies under 19 U.S.C. 1337, 22 U.S.C. 2356 and 28 U.S.C. 1498. (35 U.S.C. 157(c))

3. Understand that the above waiver will be effective pursuant to 37 CFR 1.293 upon publication of the Statutory Invention Registration to waive the inventor's right to receive a United States patent on the invention claimed in the Statutory Invention Registration. (37 CFR 1.293(b)(1))

4. State that, in my opinion, the disclosure and claims of the above identified patent application meet the requirements of 35 U.S.C. 112. (37 CFR 1.293(b)(3))

5. State that, in my opinion, the above identified patent application complies with the requirements for printing as set forth in the Rules of Practice for Patent Cases, 37 CFR Part 1. (37 CFR 1.293(b)(4))

6. Enclose the fee set forth in 37 CFR 1.17(n) or (o) for requesting publication of a Statutory Invention Registration:

☐ A first Office Action has not been mailed in the above application, 37 CFR 1.17(n) (fee code 1804) \$ _____☒ A first Office Action has been mailed in the above application, 37 CFR 1.17(o) (fee code 1805) \$1840.00

Request fee \$ _____

MINUS BASIC FILING FEE, IF PREVIOUSLY PAID☒ Basic filing fee for utility patent application set forth in 37 CFR 1.16(a): minus \$ -750.00☐ Basic filing fee for design patent application set forth in 37 CFR 1.16(f); or☐ Basic filing fee for plant patent application set forth in 37 CFR 1.16(g)
Minus basic filing fee \$ _____Amount due \$ 1090.00

Payment charged to credit card _____, Form PTO-2038 is attached.

Amount enclosed by check or money order _____

Please charge Deposit Account No. 50-0958 the amount of \$1090.00. A duplicate copy of this form is attached.If payment of any additional fee is required for publication of the Statutory Invention Registration, charge such amount to Deposit Account No. 50-0958. A duplicate copy of this form is attached.

* Where this request is submitted at the time the application is filed, the filing fee is included in the fee.

(Page 1 of 2)

This collection of information is required by 35 U.S.C. 157. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 24 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2

PTO/SB/94 (11-04)

Approved for use through 04/30/2008. OMB 0651-0036

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

- B. For printing of the Statutory Invention Registration front page, if desired, list below the name(s) of not more than 3 registered patent attorneys and agents OR alternatively, the name of a firm having as a member a registered patent attorney or agent. If no name is listed below, no name will be printed on the Statutory Invention Registration.

Jacob Shuster, Reg. No. 19,660

- C. Name of assignee, if any, for printing on the Statutory Invention Registration the United States of America
as represented by the Secretary of the Navy

Address (City and State or Country) Washington, D.C.

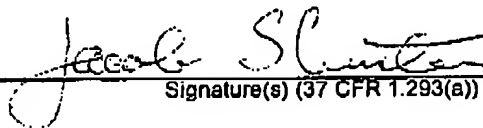
State of incorporation, if assignee is a corporation _____

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

The party or parties signing this form are:

☒ attorney or agent of record. Registration Number 19,660

☐ applicant(s) and any assignee


Signature(s) (37 CFR 1.293(a))

Jacob Shuster

Typed or Printed Name(s)

19,660
Registration Number, if applicable

301 227-1835
Telephone Number